

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M96000000241

1. Entity Name

MISSISSIPPI BAKING CO. L.L.C.

FILED

01 JAN 22 PM 4:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA.



DO NOT WRITE IN THIS SPACE

Principal Place of Business

4311 HIGHWAY 80 WEST
PELAHATCHIE MS 39145

Mailing Address

600 PHIL GRAMM BLVD
BRYAN TX 77807

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 52-1911031

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE NAME MGR MID SOUTH BAKING COMPANY, L.L.C. ☐ Delete
STREET ADDRESS 600 PHIL GRAMM BLVD
CITY-ST-ZIP BRYAN TX 77807

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME MGR BOWERS, FREDERICK J ☐ Delete
STREET ADDRESS 600 PHIL GRAMM BLVD.
CITY-ST-ZIP BRYAN TX 77803

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS 800003575948-1
CITY-ST-ZIP -01/26/01--01023--016
*****50.00 *****50.00

TITLE NAME MGR GRIMM, PETER ☐ Delete
STREET ADDRESS 6 COMMERCE DRIVE SOUTH
CITY-ST-ZIP HARRIMAN NY 10926

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME MGR OLSON, GENE ☐ Delete
STREET ADDRESS 18301 VON KARMAN AVENUE, SUITE 1100
CITY-ST-ZIP IRVINE CA 92715

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME MGRM ELLIOTT, TRAY ☐ Delete
STREET ADDRESS 600 PHIL GRAMM BLVD.
CITY-ST-ZIP BRYAN TX

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1-15-2001 979-778-6600

CR2E083 (11/00)